Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 9900	0041			Repo			CANDI	DATE	DATE COMMITTEE V LOS							
Name of Filing C	Committee, Candid	ate or L	obbyist:	i	PSSU	J LC	DCAL	668 COF	E FUNI	D			-				_
Street Address:																	
City:	HARRISBURG	ı						State:	PA			Zip Cod	le: 1	7110			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2	•	30 DA PRIMA		POST-	3. X		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5		30 DA ELECT	'	POST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2016					IG METH CHECK O				PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	te:						DATE C	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR						
								11		8	2016		(SEE IN	ISTRUCTI	ONS FOR C	ODES)	,
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		4 12	20	016	T	0	5		16	2016						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			67,9	45.32						
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule 1	I)	\$			3,3	805.92						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			71,2	251.24						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,0	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			70,2	51.24						
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sch	edul	e II)	1	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00			1			
			A	\FF	IDA'	VI٦	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	f this	s is	a Can	ididate r	eport, d	candio	late sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sched	dules	filed	on p	paper (or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe'
Sworn to and subs	cribed before me this day of	5	20							s	ignature	of Perso	n Submit	ting Rep	oort		-
	Signatu	ıre					-					Prin	ted Nam	e			-
My Commission Ex	cpires						_					Ema	il				_
	МО	D	AY	YR					Are	ea Cod	е	Daytim	e Telepi	hone Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	omm	ittee	, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief	this	politio	cal	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	late			-
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
,																	_
	МО	D.	AY	YR					Area	Code		D	aytime 1	elephor	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 COPE FUND	From:	4/12/201	<u>б</u> То:	<u>5/16/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	3,305.92
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	3,305.92

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Commit	Name of Filing Committee or Candidate						Reporting Period						
	From:												
			'		DATE			AMOUNT					
Full Name of Contributin	g Committee			МО	DAY	YEAR							
Mailing Address							\$	0.00					
City	S	State	Zip Code (Plus 4)										

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candida	Rep	Reporting Period						
Fro			From: To) :		
		•			DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		P	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.0		
Mailing Address							- \$	0.0		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00		

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL
								\$	0.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Per	iod	
PSSU LOCAL 668 COPE FUND	From:	<u>4/12/2016</u> To:	5/16/2016

				D	ATE		Al	MOUNT
Full Name					200	W=45		
PSSU COPE FUND COLI	LECTION ACCOUN	Т		МО	DAY	YEAR	\$	3,305.92
Mailing Address				4	22	2016		
City HARRISBURG		State	Zip Code (Plus 4)			2010		
		PA	17110					
Receipt Description	REPLENISHMENT (DISBURSED ON		ED TO COVER A SHORTAG	E IN THE	COLLECTI	ONS CHE	CKING	ACCOUNT

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL\$ 3,305.92

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
PSSU LOCAL 668 COPE FUND	From:	4/12/2016 To:	<u>5/16/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate Re						Reporting Period					
			From:			То:						
				DATE			AMOUNT					
Full Name of Contributor			МО	DAY	YEAR							
Mailing Address						7 \$		0.00				
City	State	Zip Code (Plus 4)										
Description of Contribution:	-	-	•	•	•							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta			iled Sum	mary Pag	ge,		PAGE TOTA	L				
Section 2.						\$		0.00				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	eriod		
PSSU LOCAL 668 COPE FUND	From	4/12/2016	То:	<u>5/16/2016</u>

			DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR		
COMMITTEE TO ELECT GORDON MARBURGER			MO		ILAK		
Mailing Address			4	13	2016	\$	1,000.00
City EVANS CITY	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16033	CONTRIBUTION				
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,000.00